

*Task Force  
Recommendations and  
Comprehensive Plan*

*Prevention of Underage Drinking*

Oklahoma Governor's Task Force on Prevention of Underage Drinking  
December 19, 2006

This prevention resource is a compilation of facts, figures, and recommendations gathered from several different key stakeholders across the State of Oklahoma regarding the issue of underage drinking. It is important to remember that it takes special collaboration between several different entities to address an issue of this magnitude. The following individuals have made valuable contributions to this endeavor. Their effort and dedication is truly appreciated.

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## **Preamble**

The Governor's Task Force on Prevention of Underage Drinking reached the fundamental conclusion that underage drinking cannot be successfully addressed in Oklahoma by focusing solely on youth. Children and youth drink alcohol within the context of an environment in which alcohol use is a normative behavior and images about alcohol are everywhere.

The overarching goal of these recommendations coincides with the national strategy on reducing underage drinking which, is to create and sustain a broad statewide and societal effort dedicated to reduce and prevent underage drinking<sup>1</sup>. This kind of commitment will require collaboration and partnership by multiple individuals and organizations at the state, local and community levels who are in positions to influence the decisions that youth make – this includes: parents, wholesale and retail outlets, law enforcement, schools, municipal leaders, state leaders, alcohol producers, restaurants and bars, media, colleges and universities, the military, landlords, community organizations, state agencies serving children, youth and families, faith-based organizations, business community, neighborhood associations, and young people themselves. The State of Oklahoma must proactively pursue opportunities to reduce and prevent the availability of alcohol to underage individuals, the opportunities for underage drinking, and the demand for alcohol among young people.

The Governor's Task Force on Prevention of Underage Drinking recommends a comprehensive approach to reduce and prevent persons under 21 from obtaining and using alcohol. This issue is comprised of not one, but multiple contributing factors. In order to adequately address this issue, the solution must be multi-faceted. These recommendations as a whole, present an opportunity to address this issue on all levels. To truly address underage drinking, all recommendations must be considered and action must not be limited to single strategy, but rather a comprehensive approach.

## **Recommendations**

1. CREATE/DESIGNATE A SINGLE STATE AUTHORITY RESPONSIBLE FOR COORDINATING UNDERAGE DRINKING ENFORCEMENT
2. STRENGTHEN EXISTING STATE LEVEL LAWS AND CREATE NEW STATE LAWS PERTAINING TO UNDERAGE DRINKING
3. INCREASE LAW ENFORCEMENT FUNDING AND RESOURCES IN ORDER TO ALLOW FOR PROPER AND CONSISTENT ENFORCEMENT OF UNDERAGE DRINKING AND OTHER ALCOHOL/3.2 BEER RELATED LAWS
4. INCREASE THE TAX ON ALCOHOL AND 3.2 BEER
5. STRONGLY ENCOURAGE THE FUNDING AND IMPLEMENTATION OF PREVENTION APPROACHES THAT ARE EVIDENCE BASED AND THAT ADDRESS CHANGING THE ENVIRONMENT AND SOCIAL NORMS AS IT PERTAINS TO ALCOHOL/3.2 BEER AND UNDERAGE DRINKING
6. EXPAND COLLABORATION OF THE TASK FORCE WITH THE OKLAHOMA MUNICIPAL LEAGUE AND THE OKLAHOMA CONFERENCE OF MAYORS TO ADOPT MODEL LOCAL ORDINANCES ON UNDERAGE DRINKING PREVENTION
7. LIMIT YOUTH ACCESS TO ALCOHOL AND 3.2 BEER
8. REQUIRE AND PROVIDE MERCHANT EDUCATION IN ORDER TO REDUCE AND PREVENT UNDERAGE DRINKING
9. DEVELOP AND IMPLEMENT A STATEWIDE MEDIA EFFORT
10. ENHANCE OPPORTUNITIES FOR YOUTH LEADERSHIP EFFORTS ON REDUCING AND PREVENTING UNDERAGE DRINKING, SPECIFICALLY PROJECT UNDER 21
11. CREATE A CENTRAL RESEARCH AND EVALUATION DATA REPOSITORY
12. PREVENT AND REDUCE ADVERSE CHILDHOOD EXPERIENCES

This submittal concludes the work of the Task Force that was formed by Executive Order Number 2005-36 submitted on December 19, 2005. It is the Task Force's intent that these recommendations will have a positive impact on our state as well as the many thousands of Oklahomans who are impacted by underage drinking. These recommendations become our plea for action, our hope that Oklahoma will respond as constructively as it has with other crises, and our desire that we become national leaders in preventing and reducing underage drinking. The Task Force recommends institutionalizing the Governor's Task Force on Prevention of Underage Drinking in order to monitor implementation of the comprehensive plan.

## Discussion of Recommendations

### 1. CREATE/DESIGNATE A SINGLE STATE AUTHORITY RESPONSIBLE FOR UNDERAGE DRINKING ENFORCEMENT

**Primary Identified Problem** – Currently there is not a single state authority responsible for the enforcement of laws on 3.2 beer. The Alcohol Beverage Law Enforcement (ABLE) Commission only has constitutional authority to enforce intoxicating alcohol (Oklahoma Attorney General Opinion 06-33, ABLE Commission & Beer) and 3.2 beer is defined as non-intoxicating in O.S. 37 § 163.1.

**Task Force Recommendation** – Oklahoma must designate a single state authority responsible for the enforcement of 3.2 beer.

**Rationale** – Coordinated statewide law enforcement of 3.2 beer laws will significantly increase the number of compliance checks, therefore increasing the compliance rate and ultimately reducing the availability of 3.2 beer to underage individuals. This recommendation does not exclude local law enforcement from enforcing the laws within their own municipality, but rather is designed to strengthen local law enforcement and provide additional resources for enforcement efforts. It is the intention of the Task Force that this authority mirrors the ABLE Commission’s current authority over alcohol.

**Suggested Actions** – The Task Force recommends the following actions:

1. Name the ABLE Commission the single state agency authorized to enforce laws pertaining to 3.2 beer (Provide the ABLE Commission with the same authority over 3.2 beer as they currently have with alcohol.)
2. Redefine 3.2 beer as intoxicating alcohol
3. Strengthen compliance check programs in retail outlets through training and increased implementation
4. Create the ABLE Commission in statute as a new state agency in order to enforce 3.2 beer.

**Suggested Community Actions** – Community level involvement is not applicable for this recommendation.

## 2. STRENGTHEN EXISTING STATE LEVEL LAWS AND CREATE NEW STATE LAWS PERTAINING TO UNDERAGE DRINKING

**Primary Identified Problem** – Existing state laws pertaining to underage drinking do not comprehensively or sufficiently address the scope of the problem for various reasons, including lack of enforceability, investigation and inconsistency in the laws. Many state laws are too broad, and only apply to situations in which the very worst consequences occur, or only address the problems that result from underage drinking rather than addressing the prevention of underage drinking.

**Task Force Recommendation** – Certain existing state laws related to underage drinking should be strengthened to counter problems with enforcement. New model state policies should be examined and enacted.

**Rationale** – Strong, enforceable state laws that comprehensively address youth access to alcohol and the culture of acceptance of youth alcohol/3.2 beer use have been shown to prevent and reduce the problems associated with underage drinking. Significant action must be taken to enact state laws that set the standard for the nation on the prevention of underage drinking. Oklahoma law currently prohibits anyone under the age of 21 from entering a liquor store. Employees must be 18 years of age to serve alcohol in a restaurant. However, this is not the case for convenience stores or other retail outlets of 3.2 beer. The statutes are ambiguous in regards to minimum age requirements for clerks in outlets for off-premise consumption. A clerk as young as 16 years old may sell 3.2 beer. This poses a problem as we understand the impact of peer pressure on our youth today. The minimum age of sellers in on and off premise outlets for 3.2 beer should mirror that of liquor. This removes the burden of decision making from the hands of the youth and places it in the hands of the adults.

**Suggested Actions** – The Task Force recommends the following actions:

1. Strengthen Social Host Law, HB 2762: Cody's Law to include:
  - 3.2 beer
  - Holding individuals criminally liable for providing alcohol/3.2 beer to minors in any setting (retail, social, in the home, etc.)
  - Liability for injuries related to alcohol/3.2 beer or other drugs consumption or possession.
  - Component on investigation to support a felony charge
2. Develop state laws restricting alcohol/3.2 beer advertising
  - Prohibiting ads on buses, trains, kiosks, billboards, supermarket carts, and in bus shelters, schools, and theme parks
  - Prohibiting outdoor advertising in areas near schools, residential areas, faith organizations, and other places where youth frequent
  - Restricting the size and placement of window advertisements in alcohol/3.2 beer outlets

3. Legislatively mandated responsible beverage sales/service training for all on-premise, off-premise, and special event sellers/servers/owners where alcohol/3.2 beer is sold and/or consumed.
4. Develop state laws that on and off sale vendors must be 21+ to sell 3.2 beer
  - Prohibit under 21 from selling or dispensing alcohol and 3.2 beer (all on and off sale)
5. Strengthen keg registration laws-include all sizes of kegs
  - Create mechanism for tracking and monitoring keg sales
  - Include 3.2 beer in keg registration law and allow ABLE Commission to enforce, track and monitor keg registration law (currently by statute the Oklahoma Tax Commission has jurisdiction over 3.2 beer in the keg registration law, but they lack the ability to enforce the law)

**Suggested Community Action** – The Task Force recommends the following actions:  
Review existing county and city ordinances related to underage drinking and strengthen the ordinances accordingly regarding issues such as:

- an environmental focus on zoning
- alcohol outlet density
- minors present at establishments whose principal business is serving alcoholic drinks
- irresponsible drink specials
- noise control.

NOTE: Include the provision to confiscate the driver's license on the spot from an underage person who consumes, possesses or attempts to purchase 3.2 beer or alcohol.

**3. INCREASE LAW ENFORCEMENT FUNDING AND RESOURCES TO ALLOW FOR PROPER AND CONSISTENT ENFORCEMENT OF UNDERAGE DRINKING AND OTHER ALCOHOL/3.2 BEER RELATED LAWS**

**Primary Identified Problem** – Law enforcement lack adequate funding and resources to consistently and effectively enforce underage drinking and other alcohol/3.2 beer related laws. In addition, many agencies do not have resources exclusively dedicated to underage drinking and alcohol/3.2 beer related laws.

**Task Force Recommendation** – Earmark taxes on alcohol/3.2 beer sales for prevention efforts to include strengthening of law enforcement efforts.

**Rationale** – Consistent and regular enforcement of underage drinking and alcohol/3.2 beer laws will reduce the prevalence of minors obtaining and consuming alcohol/3.2 beer. This will also facilitate an important opportunity to make a difference in the lives of our youth.

**Suggested Actions** – The Task Force recommends the following actions:

1. Create a statewide law enforcement task force led by the ABLE Commission to allow collaboration and cross-jurisdictional enforcement operations for underage alcohol and 3.2 beer violations.
2. Provide education and training to courts and judges on underage drinking and alcohol/3.2 beer related issues
3. Require mandatory education programs and assessment for youth and adult offenders upon any alcohol/3.2 beer violation and provide education to local law enforcement on underage drinking laws so that existing local ordinances are adequately enforced and understood
4. Increase the number of DUI courts for offenders under 21

**Suggested Community Action** – The Task Force recommends the following actions:

- Provide the resources and training necessary for community groups and coalitions to work with law enforcement to ensure and publicize quality compliance checks and other underage drinking prevention related activities.
- Encourage coalitions to coordinate with others in their community or region to help build a network of community-based coalitions focused on prevention and leveraging limited resources through collaborative efforts.
- Ask local coalitions and organizations to ensure that law enforcement has a stake in local activities and actions to reduce underage drinking.

**4. INCREASE THE TAX ON ALCOHOL AND 3.2 BEER**

**Primary Identified Problem** – Alcoholic beverages are cheaper today than they were in the 1960s and 1970s (adjusted for inflation) according to a recent report by the National Research Council and Institute of Medicine (2004).

**Task Force Recommendation** – Earmark taxes on alcohol/3.2 beer sales for prevention, treatment and enforcement efforts for underage drinking prevention and reduction. Priority should be given to raising the 3.2 beer taxes and excise tax rates for all alcoholic beverages should be set at the consumer price index so that the tax keeps pace with inflation, and negating further legislative action.

**Rationale** – Increasing the price of alcohol products has been documented to reduce youth alcohol consumption. Increasing the excise tax on alcohol will help reduce youth consumption while simultaneously creating funding that can be used to reduce and prevent underage drinking and related problems.

**Suggested Actions** – The Task Force recommends the following actions:

1. Raise the current tax rate in Oklahoma to the proposed tax rate (shown below).
2. The table below represents the Task Force’s proposed tax rates and were generated after extensive review of other state’s current rates.
3. Conduct a comprehensive study to understand the potential impacts of increasing alcohol taxes on alcohol and youth consumption, the health and safety of children and youth, state revenues and local businesses.

O.S. 37, §. 553

Type	Current Tax Rate	Proposed Tax Rate	Difference	Amount Taxed	Estimated Earmark
Spirits	\$1.47 per liter	\$1.62 per liter	\$0.15 per liter	\$15,347,548.46	\$2,256,089.62
Wine over 14%	\$.37 per liter	\$0.21 per liter	\$0.02 per liter	\$884,835.21	\$237,110.24
Wine 14% and under	\$0.19 per liter	\$0.41 per liter	\$0.04 per liter	\$12,479,486.07	\$32,738.90
Sparkling Wine	\$0.55 per liter	\$0.61 per liter	\$0.06 per liter	\$710,382.57	\$39,071.04
Beer	\$11.25 per barrel*	\$12.38 per gallon	\$1.13 per liter	\$1,467,3448.47	\$1,650,767.03
Strong Beer	\$12.50 per barrel*	\$13.75 per gallon	\$1.25 per liter	\$122,116.68	\$ 152,645.85

\* one barrel is equal to 31 gallons.

**Suggested Community Action** – The Task Force recommends the following actions: Advocate for the increase in taxes and educate community members on the need and the implication for prevention.

**5. STRONGLY ENCOURAGE THE FUNDING AND IMPLEMENTATION OF PREVENTION APPROACHES THAT ARE EVIDENCE BASED AND THAT ADDRESS CHANGING THE ENVIRONMENT AND SOCIAL NORMS AS IT RELATES TO ALCOHOL/3.2 BEER AND UNDERAGE DRINKING**

**Primary Identified Problem** – Many traditionally supported and favored prevention approaches are not evidence-based, meaning they have not been evaluated and have not been shown to be effective. In addition, traditional underage drinking prevention programs and strategies that only address individual behavior are largely ineffective when they do not also address the communities and cultures (the “environment”) in which young people make decisions about alcohol/3.2 beer use.

**Task Force Recommendation** – Earmark state funds for evidence based prevention services with an emphasis on environmental prevention strategies.

**Rationale** – "Evidence-based" strategies are prevention methodologies that have been developed and evaluated using scientific processes. Evidence-based is also referred to as science-based and research-based models. Evidence-based environmental approaches have been shown to affect major positive changes of alcohol problems and have demonstrated the ability to sustain a long-term impact. Environmental approaches in preventing problems related to underage drinking use a public health model to address the environment where problems occur. In addition to their recognized effectiveness, prevention strategies using environmental approaches operate more efficiently than other approaches. Environmental strategies have demonstrated the ability to sustain a lasting impact. In addition, they produce a much larger impact per dollar invested than other approaches.

**Suggested Actions** – The Task Force recommends the following for State and Community action:

1. Disseminate the Center for Substance Abuse Prevention Service to Science Initiative in order to evaluate local grassroots underage drinking prevention efforts currently underway in Oklahoma. Service to Science is a national initiative supported by the Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Prevention to enhance the evaluation capacity of innovative programs and practices that address critical substance abuse prevention or mental health needs.
2. Encourage and help support local community’s implementation of Communities Mobilizing for Change on Alcohol (CMCA) program. CMCA is a community-organizing program designed to reduce youth access to alcohol/3.2 beer by changing community policies and practices.
3. Conduct a literature review of evidence based prevention approaches specific to prevention and reducing underage drinking for replication in communities in Oklahoma. The results of this review shall be disseminated to communities to make them aware of different strategies they can implement.

**6. EXPAND COLLABORATION OF THE TASK FORCE WITH THE OKLAHOMA MUNICIPAL LEAGUE AND THE OKLAHOMA CONFERENCE OF MAYORS TO EXPAND THE ADOPTION OF MODEL LOCAL ORDINANCES ON UNDERAGE DRINKING PREVENTION**

**Primary Identified Problem** – State-level legislation does not always adequately address all local problems that communities experience related to underage drinking. State-level policy change can be a slow process and often uses a “broad brush” approach to policy solutions. City municipalities struggle with neighborhood and community-level alcohol/3.2 beer problems that often can only be effectively addressed through local ordinances. In many cases, city officials are unaware of their authority to enact local underage drinking ordinances and may not even be attuned to the problem of underage drinking in their community.

**Task Force Recommendation** – Expand and sustain existing partnership with city municipalities to increase the adoption of Model Local Ordinances on underage drinking prevention

**Rationale** – In many cases, city municipalities have the authority to enact local ordinances related to alcohol/3.2 beer that are stronger than state legislation due to the lack of pre-emption in the State of Oklahoma. In addition, city municipalities can design policy solutions that address local problems not covered by state legislation. City officials need to be educated on the impact of underage drinking in their communities and need guidance from organizations such as the Oklahoma Municipal League on model ordinances that have shown effectiveness in addressing underage drinking in other cities across the nation.

**Suggested Actions** – The Task Force recommends the following Model Local Ordinances:

1. Restrictions on alcohol/3.2 beer advertising
  - Prohibiting ads on buses, trains, kiosks, billboards, supermarket carts, and in bus shelters, schools, and theme parks
  - Prohibiting outdoor advertising in areas near schools, residential areas, faith organizations, and other places where youth frequent
  - Restricting the size and placement of window advertisements in alcohol/3.2 beer outlets
  - Requiring alcohol/3.2 beer ads to be placed above eye level of children and away from candy, etc (placement).
2. Alcohol/3.2 beer free parks/recreation areas
  - Prohibiting alcohol/3.2 beer from parks or similar areas that are frequently occupied by minors.

3. Alcohol/3.2 beer free community events and alcohol free sponsorship
  - Prohibiting alcohol/3.2 beer sponsorship of city events, community fairs, sporting events, and cultural festivals
  - Prohibiting the distribution of alcohol/3.2 beer promotional items
  - Prohibiting signs with an alcohol/3.2 beer sponsors name from being displayed
4. Special zoning permit (conditional use permit) that allows local jurisdictions to place conditions on the operation of alcohol/3.2 beer outlets.
5. Deemed approved ordinance that requires alcohol/3.2 beer outlets to comply with minimum operating standards designed to reduce nuisance related activity occurring around the premises.
6. Noisy assembly policies that provide law enforcement leverage to respond to and investigate underage drinking in private settings. Noise abatement ordinances in some Oklahoma cities have proven to be instrumental in party dispersal attempts.
7. Social host ordinance to hold adults liable for allowing underage drinking to occur on property in their control.
8. Restrictions on special events where alcohol/3.2 beer is sold or served. Such restrictions may include alcohol sale cut-off times or limitations on number of drinks sold to each consumer.

**Suggested Community Action** – The Task Force recommends the following actions:  
Call on local coalitions to ensure that all segments of the community have a stake in local activities and actions to reduce underage alcohol problems, including:

- Youth
- Parents
- Educators
- Elected officials
- Business leaders
- Local alcohol industry partners
- Prevention/intervention and treatment providers
- Law enforcement
- Health and human service providers

## 7. LIMIT YOUTH ACCESS TO ALCOHOL AND 3.2 BEER

**Primary Identified Problem** – Sixty-five percent of Oklahoma youth report that it is easy to obtain alcohol/3.2 beer.

**Task Force Recommendation** – Limit youth access through enforcement of laws which could be enhanced through increasing compliance checks, requiring all sellers and servers to complete a state-approved training on responsible beverage server/seller training as a condition of employment, implementing zero tolerance laws, “cops in shops”, enacting dram shop liability statutes, routinely implementing sobriety checkpoints, strengthening social host laws and continue to restrict the sale of alcohol products to individuals under 21 by maintaining availability and sales only in liquor stores.

**Rationale** – Limiting youth access to products containing alcohol has been shown to be effective across the country in preventing and reducing underage drinking and related problems.

**Suggested Actions** – The Task Force recommends the following actions:

1. Cops in shops: This program requires collaborative efforts between alcohol retailers and local law enforcement. Law enforcement officials are stationed inside alcohol/3.2 beer retail locations while posing as an employee or customer in an attempt to apprehend underage consumers. This program also provides education to alcohol vendors on different aspects of underage drinking such as recognizing fake identification and behavioral characteristics of underage consumers.
2. Enact dram shop liability statutes: Dram shop laws make it possible to hold bars and alcohol/3.2 beer servers financially liable if a patron becomes too intoxicated at their establishment and subsequently injures another or damages property as a result of driving drunk. Most states have a dram shop law in place, but to varying degrees. Landmark third-party lawsuits have motivated states to strengthen their dram shop laws.
3. Increased compliance checks: Despite the laws restricting such action, alcohol vendors continue to sell alcohol/3.2 beer to minors at an alarming rate. A proven strategy to combat this dilemma has been the execution of alcohol/3.2 beer compliance checks. A compliance check is a method used to identify the alcohol/3.2 beer retailers that sell to underage consumers. Compliance checks can be used to enforce underage drinking laws or educate establishments about the laws regarding alcohol/3.2 beer sales to minors. Studies show that compliance checks are effective. In a large study in Minnesota, sales to youth were reduced immediately by 17 percent in alcohol establishments that experienced a check. <http://www.epi.umn.edu /alcohol/policy/ compchks.shtm>

4. Prohibit under 21 from selling or dispensing alcohol and 3.2: (all on and off premise sale vendors) Oklahoma law currently prohibits anyone under the age of 21 from entering a liquor store. Employees must be 18 years of age to serve alcohol in a restaurant. However, this is not the case for convenience stores or other retail outlets of 3.2 beer. The statutes are ambiguous in regards to minimum age requirements for clerks in outlets for off-premise consumption. A clerk as young as 16 years old may sell 3.2 beer. This poses a problem as we understand the impact of peer pressure on our youth today. The minimum age of sellers in on and off premise outlets for 3.2 beer should mirror that of liquor. This removes the burden of decision making from the hands of the youth and places it in the hands of the adults.
5. Responsible Beverage Sales/Service Training (RBST): Also known as "server training," this refers to educating owners, managers, servers and sellers at on and off premise sale alcohol/3.2 beer establishments about strategies to avoid illegally selling alcohol/3.2 beer to underage youth or intoxicated patrons. Training can be required by a local ordinance and may provide incentives for businesses that undergo training. The goal of RBST is to decrease the number of illegal alcohol/3.2 beer sales to underage youth and intoxicated patrons through education programs that help managers and servers/sellers understand state, community, and establishment-level alcohol/3.2 beer policies as well as the potential consequences for failing to comply with such policies (e.g., criminal or civil liability, job loss) and provides the necessary skills to comply with these policies. Other information can also be included in server training such as the importance of checking age identification of customers who appear under age 30, how to identify fake IDs and what to do once a fake ID is confiscated, how to recognize situations in which adults are buying alcohol/3.2 beer for underage youth, how to refuse sales to individuals who may supply alcohol/3.2 beer to underage youth, how to identify intoxicated customers, and how to effectively refuse service to underage youth and intoxicated customers. (<http://www.epi.umn.edu/alcohol>)
6. Routinely implement sobriety checkpoints: Sobriety checkpoints are used by law enforcement officials to determine whether a driver is under the influence of any drugs or alcohol/3.2 beer. This procedure was deemed constitutional in 1990, and Oklahoma is one of several states that have sobriety checkpoint laws in place. Studies have shown that sobriety checkpoints can reduce alcohol-related crashed and fatalities by 20 percent. [http://www.madd.org/madd\\_programs/7615](http://www.madd.org/madd_programs/7615)
7. Social host liability: Youth often obtain alcohol/3.2 beer at parties held at private residences or at rented spaces (such as hotel rooms, meeting halls and other similar places). The adult owner or renter is often not held responsible for underage drinking that occurs at the party. Adults who believe they will be held responsible for allowing underage drinking may be more likely to supervise such parties on property under their control. Under social host liability laws, adults

who serve or provide alcohol/3.2 beer to minors or persons who are obviously intoxicated can be held civilly and/or criminally liable.  
<http://www.epi.umn.edu/alcohol>

8. Zero tolerance laws: Make it illegal for anybody under the age of 21 to drive with any measurable amount of alcohol in their system. Currently, Oklahoma is only one of 13 states that has a zero tolerance law with an established zero tolerance BAC of .00. The issue in Oklahoma is the adequate and consistent enforcement of such legislation. Studies have shown that enforcement of zero tolerance laws can result in a significant decrease of underage drinking related car crashes.  
<http://www.nhtsa.dot.gov/people/outreach/safesobr/13qp/facts/factzero>
9. Restrictions on party buses, limousines, etc.: Create restrictions on party buses, limousines and other motorized vehicles that allow alcohol/3.2 beer consumption as part of their delivery service. Require operators to possess the same licensure requirements for on and off premise sales.

**Suggested Community Action** – The Task Force recommends the following actions: Ensure that all current minimum legal drinking age laws are adequately enforced through partnerships between local law enforcement and community leaders. Support local community partners working closely with law enforcement to review research-based local ordinances applicable to underage drinking, and consider utilizing existing ordinances and implementing any new underage drinking related ordinances. Such action may include:

- Restricting the number of alcohol outlets in a neighborhood
- Detecting and terminating underage drinking parties and investigating probable underage drinking parties utilizing noise or nuisance ordinances
- Patrolling open spaces and other locations utilized for parties
- Restricting alcohol sales, sponsorship and advertising at youth, family and school events, including athletic events
- Engaging support from the media to publicize information about underage drinking laws at events that attract underage youth
- Ensuring local compliance with Oklahoma’s keg registration law by encouraging community coalitions to work with both law enforcement and the liquor industry to conduct community surveys regarding retailers’ use of keg registration

**8. REQUIRE AND PROVIDE MERCHANT EDUCATION IN ORDER TO REDUCE AND PREVENT UNDERAGE DRINKING (DESIGNATE A SINGLE STATE AUTHORITY RESPONSIBLE FOR MERCHANT EDUCATION)**

**Primary Identified Problem** – Despite laws prohibiting alcohol/3.2 beer sales to youth under age 21, youth are able to purchase alcohol/3.2 beer at an alarming rate from licensed alcohol/3.2 beer retailers. This can be attributed, in part, to lack of required training for persons who serve and sell alcohol/3.2 beer in the State of Oklahoma. Deficits in training include: applicable alcohol/3.2 beer laws as well as effective methods for checking age identification, identifying false identification, recognizing when adults are purchasing alcohol/3.2 beer for underage youth, proper sales/service refusal techniques, and business practices/policies that prevent irresponsible and illegal alcohol/3.2 beer sales.

**Task Force Recommendation** – Require all sellers, servers, and owners of licensed alcohol/3.2 beer retail establishments to complete a state-approved training on responsible beverage service/sale training as a condition of employment. Require responsible beverage services/sale training for all servers and sellers at special events with temporary alcohol/3.2 beer licenses.

**Rationale** – Many states with mandatory responsible beverage sales/service training have experienced dramatic decreases in illegal alcohol/3.2 beer sales to underage youth and obviously intoxicated patrons and the associated problems such as alcohol-related crashes, injuries, and deaths.

**Suggested Action** – The Task Force recommends the following actions:

1. Legislatively mandated responsible beverage sales/service training for all on-premise, off-premise, and special event sellers/servers/owners where alcohol/3.2 beer is sold.
2. Compliance check warning citations
3. Consistent signage for alcohol/3.2 beer (Appendix B)
  - Signage that one must be 21 to purchase and consume
  - Signage of the risks of consuming alcohol/3.2 beer while pregnant
  - Signage on the penalties of providing alcohol/3.2 beer to minors
4. The Task Force suggests laws that require alcohol/3.2 beer ads to be placed above eye level of children and away from candy.

**Suggested Community Action** – The Task Force recommends the following actions: Implement training that is readily available to alcohol retailers about underage drinking prevention and resources including information regarding laws against providing alcohol to minors. Such trainings could include:

- Responsible Beverage Service Training (RBST)
- TIPS Alcohol Server/Seller Program
- ServSafe Alcohol Program

**9. DEVELOP AND IMPLEMENT A STATEWIDE MEDIA EFFORT ON PREVENTION OF UNDERAGE DRINKING**

**Primary Identified Problem** – Whether youth obtain alcohol/3.2 beer from a parent or a retailer, adults are often the main source of alcohol/3.2 beer for young people. Adults have not historically been the target of state or local media campaigns on underage drinking. Despite the fact that alcohol/3.2 beer is the number one drug of choice among America’s and Oklahoma’s youth, existing federal anti-drug media campaigns do not produce media messages on underage drinking. Also, youth and adult exposure to underage drinking prevention media messages are vastly outweighed in Oklahoma by the saturation of alcohol/3.2 beer industry advertising and promotion.

**Task Force Recommendation** – The State of Oklahoma should fund and actively support the development of a statewide media effort as a major component of an adult and retailer oriented campaign to reduce and prevent underage drinking.

**Rationale** – Oklahoma adults need to increase their knowledge and acceptance of existing underage drinking laws and need to increase their active support for new policies that decrease youth access to alcohol/3.2 beer and the social acceptance of underage drinking. Media messages exclusively aimed at changing youth behavior do not address the fact that adults, including retailers, are the main source of alcohol/3.2 beer for youth. A media campaign targeted to adults, as well as an effort to reduce alcohol/3.2 beer advertising to youth, is a critical part of a comprehensive prevention strategy.

**Suggested Actions** – The Task Force recommends the following actions:

1. Development and implementation of a statewide campaign using research-based, effective messages aimed at increasing adults’ awareness on the problem of underage drinking, why they should want to prevent and reduce the problem, and specific actions they can take to reduce and prevent underage drinking and decrease adult conduct and activities that facilitate or support underage drinking (Media Campaign Plan included in Appendix C).
2. Development and implementation of a statewide campaign to reduce alcohol/3.2 beer advertising near places where youth frequent, in sports venues, and community/state special events.

**Suggested Community Action** – The Task Force recommends the following actions: Monitor the activities and impact of the media campaign in order to adjust the campaign as needed, and use materials from the state media campaign to distribute to local media outlets including:

- Letters to the editor
- Press conferences
- Community forums
- Radio, television, and billboard public service announcements.

Local coalitions should serve as the information source for members of the media to contact for information on local underage drinking efforts and to provide feedback to the state campaign.

**10. ENHANCE OPPORTUNITIES FOR YOUTH LEADERSHIP EFFORTS ON REDUCING AND PREVENTING UNDERAGE DRINKING, SPECIFICALLY PROJECT UNDER 21**

**Primary Identified Problem** – Oklahoma has several programs and initiatives centered on the health and safety of youth. Research has shown that the involvement of youth in creating positive change for their communities through participation in these programs and initiatives to be effective. Currently, there are not many opportunities for youth to participate in shaping the solutions to their own issues.

**Task Force Recommendation** – Support Project Under 21 efforts

**Rationale** – Youth leadership is a critical part of preventing underage drinking in Oklahoma. They possess the best insight into the issue of underage drinking because they are part of the issue. It is important to realize that youth can be as much a part of the solution as well. No one can reach youth better than their peers.

**Suggested Action** – The Task Force recommends the following for State and Community action: Involve youth in meaningful ways with any strategy to reduce underage alcohol problems at the local level, including designing, advocating for, and implementing policy and environmental strategies for change. Such activities may include:

1. Project Under 21: An initiative of the Oklahoma Department of Public Safety, Highway Safety Office, Project Under 21 is funded by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) through the Enforcing Underage Drinking Laws (EUDL) program. The main goal of Project Under 21 is to reduce and prevent underage drinking in Oklahoma. Youth leadership, one component of Project Under 21’s strategy to prevent youth from drinking underage, proves to be an effective method of prevention.
2. Camp U21: Started as a Project Under 21 initiative, this camp is designed to develop youth leadership skills. At the camp, youth learn effective strategies to reduce and prevent underage drinking in their communities. They are given the tools, motivation and support to return to their communities and take a leadership role to prevent underage drinking. The youth design an action plan specific to the needs of their community and are given the charge of implementing their action plan when they return home. Camp U21 also provides youth the opportunity to utilize their creativity and talents.
3. Club U21: A youth-oriented Project Under 21 initiative. Currently there are approximately 30 U21 Clubs across Oklahoma actively participating in efforts to reduce underage drinking in their respective communities. The clubs are youth-led and focus on preventing underage drinking in their communities and schools. With the assistance of an adult sponsor, students plan activities to reduce underage drinking at prime times such as prom and graduation. The alcohol-free events provide alternative activities for youth that are fun and engaging. Some

clubs host back-to-school events to make their club more visible within the school and recruit more youth to get involved. The U21 Clubs also work on projects with lasting change within the community such as changing school policy, private policy, and advocating for local ordinances and state legislation

4. Youth focus groups: A youth focus group would consist of selected youth that would be asked open-ended questions in regard to underage drinking. Youth focus groups help understand how youth feel about underage drinking as well as provide insight into the reasons for those feelings. Youth focus groups can also provide insight as to what strategies may be most effective in addressing the issue of underage drinking. A youth focus group would be similar to a town hall meeting event. However, a youth focus group would be used as a tool for getting an even closer look at the issue of underage drinking from the inside while also listening to recommendations that address the issue as well.

**11. CREATE A CENTRAL RESEARCH AND EVALUATION DATA REPOSITORY THAT INCLUDES UNDERAGE DRINKING INCIDENCE AND PREVALENCE, INJURY AND MORTALITY DATA, AND STUDENT SELF REPORT DATA FOR ALL OKLAHOMA YOUTH THAT CAN BE ACCESSED BY ALL AGENCIES**

**Primary Identified Problem** – Oklahoma has no central data repository for Oklahoma specific data which limits Oklahoma’s ability to adequately assess the needs and problems associated with underage drinking

**Task Force Recommendation** – Direct funding to establish a central research and evaluation data repository for Oklahoma. This state repository shall be facilitated by the Oklahoma Department of Mental Health and Substance Abuse Services in collaboration with the Oklahoma State Epidemiological Outcomes Workgroup.

**Rationale** – Oklahoma does not have access to quality data on underage drinking. The data that is available is fragmented, scattered across numerous agencies, and does not coincide with national data standards.

**Suggested Action** – The Task Force recommends the following actions:

1. The data repository should include underage drinking incidence and prevalence, injury and mortality data, and student self report data for all Oklahoma youth.
2. Provide support to all state agencies that collect data on youth to strengthen efforts and create the opportunity for data sharing between agencies.
3. Promote the use of data to assess the changes in youth’s consumption and consequences from alcohol/3.2 beer and use the data to direct Oklahoma policy.
4. Oklahoma’s data collection methods should be more inline with the methods used at the national level. Oklahoma should collect similar questions or at least a minimal data set of questions recommended by national surveys. If Oklahoma collects similar questions then we can use local surveys for county and community assessments and the national surveys for state level assessments.
5. Ongoing research and evaluation are needed in order to evaluate the effectiveness of specific interventions and activities to ensure that recommendations are grounded in evidence based approaches.
6. Youth surveys in Oklahoma are extremely under-funded. Oklahoma needs more funding to continue and enhance the quality of youth self report surveys that are designed to assess alcohol/3.2 beer consumption patterns and consequences and assess areas to direct prevention efforts.
7. Develop and strengthen efforts requiring all schools to participate in statewide needs assessments.

**Suggested Community Action** – The Task Force recommends the following actions:

- Continue to press for the availability and usability of local, regional and statewide data for program evaluation and effective targeting of resources for prevention programming at the community level.
- Continue to use data driven decision making process for all prevention planning.

## 12. PREVENT AND REDUCE ADVERSE CHILDHOOD EXPERIENCES

**Primary Identified Problem** – Household mental illness and substance abuse significantly increase the risk of an unpredictable home life and are linked to higher rates of domestic violence, divorce, unemployment, and involvement in the criminal justice system. Children who face adverse childhood experiences have been shown to have a higher prevalence of depression, anxiety, eating disorders and suicide attempts than their peers.

**Task Force Recommendation** – Develop and fund services designed to prevent and reduce Adverse Childhood Experiences among Oklahoman children.

**Rationale** – Research suggest that Adverse Childhood Experiences (ACE) cause children pain, which can lead them to turn to high-risk behaviors (such as drinking alcohol/3.2 beer) as a means of coping or covering their pain. ACEs evolve into risky behaviors among children, which, in turn, can evolve into disease and death. The more traumas they experience, the greater the likelihood of adopting multiple risk behaviors, such as alcohol/3.2 beer or drug abuse, smoking, overeating and promiscuity. Child abuse and household trauma leave a child vulnerable, disrupting the normal development of the brain. Strategies and efforts to prevent and reduce underage drinking must take into consideration the various underlying reasons that may contribute to why one starts drinking.

The financial costs of treating illness caused by tobacco, alcohol/3.2 beer and other drug abuse in Oklahoma are staggering. The Governor’s and Attorney General’s Blue Ribbon Task Force on Mental Health, Substance Abuse and Domestic Violence (2005) conservatively placed the costs at more than \$1.8 billion annually in direct expenditures. The majority of these costs are related to safety and security issues, as well as the contribution of substance abuse to domestic violence, sexual assault and the resulting child abuse and neglect. This underscores the findings of the ACE research regarding the intermingled and cumulative effect of family dysfunction.

**Suggested Actions** – The Task Force recommends the following actions:

1. Improve the coordination of adult and pediatric health care with related substance abuse and mental health services by expanding the information gathered on medical histories to include exposure to Adverse Childhood Experiences. In addition, inform physicians about available substance abuse and mental health treatment services, in doing so incorporating substance abuse prevention services in the primary care setting.
2. Institutionalize parenting programs for all parents by providing public health education using an existing model with first time parents.
  - Public health educators work intensively with these parents to improve maternal, prenatal, and early childhood health and well being with the expectation that this intervention will help achieve long-term improvements in

the lives of at-risk families. The intervention process is effective because it focuses on developing therapeutic relationships with the family and is designed to improve five broad domains of family functioning: Health (physical and mental); home and neighborhood environment; family and friend support; parental roles; and major life events (e.g., pregnancy planning, education, employment).

- Starting with expectant parents, the program addresses substance abuse and other behaviors that contribute to family poverty, subsequent pregnancies, poor maternal and infant outcomes, suboptimal childcare, and a lack of opportunities for the children.
3. Increase early identification of substance abuse, mental health, child abuse and household trauma, confirmed by a professional assessment and followed by appropriate treatment or services for children and adolescents to reduce the risk.

**Suggested Community Action** - The Task Force recommends the following actions:

Develop and sustain community based systems that would offer the following resources to families:

- Education on the adverse impact of alcohol on a child's developing brain
- Brochures describing the signs and symptoms of a child abusing alcohol
- Education on risk and protective factors associated with ACE
- Effective parenting skills and family management skills

## Overview of the Governor's Task Force on Prevention of Underage Drinking

In October 2005, Governor Brad Henry selected a team of seven individuals to attend a national meeting to address the serious problem associated with underage drinking. As a result of this meeting, Governor Brad Henry, by executive order dated December 19, 2005, created a 15 member Task Force on Prevention of Underage Drinking. A copy of the executive order is included in Appendix A.

The Task Force was charged with conducting a comprehensive study on the effect of underage drinking in Oklahoma. The overall purpose for the study is to have in place reasonable and effective strategies, policies, practices, and programs to reduce and prevent underage drinking. The goal is to reverse the alarming current use of alcohol by almost half of youth in Oklahoma (compared to the national average of 44.9 percent), and even more alarming, one of every four youth in the State report they consumed alcohol before their thirteenth birthday.

The study includes the following:

- A needs assessment of the nature and extent of underage drinking
- Identification of current activities and resources that are available to effectively reduce and prevent underage drinking
- Identification of barriers and challenges to preventing and reducing underage drinking
- Examination of overall enforcement efforts including range of penalties

In order to accomplish the goals of the study, the Task Force decided to create subcommittees to address the four major areas of the study: legislative/policy, environmental, needs assessment, and enforcement. Subcommittees also allowed for a broad representation of individuals to be involved in the study.

The subcommittees were created to make recommendations to the Governor's Task Force in the following areas:

- **Environmental** – The subcommittee was charged with: Identifying strategies to reduce underage access to alcohol; Conducting an environmental scan of Oklahoma programs designed to reduce or prevent U21 use; Evaluating the industry's influence on U21 prevention programming in Oklahoma; and making recommendations for programming needs.
- **Legislative/Policy** – The subcommittee was charged with reviewing all state laws regarding underage drinking and making recommendations to strengthen new laws; Reviewing local ordinances and making recommendations for 'model' ordinances.
- **Needs Assessment** – The subcommittee was charged with conducting a comprehensive needs assessment to determine the nature and extent of underage drinking in Oklahoma and prioritizing needs across the state based on data collected.
- **Enforcement** – The subcommittee was charged with examining the overall law enforcement efforts, including the range of penalties for different violations and the interaction of enforcement agencies in regards to underage drinking; Identifying barriers to implementing underage drinking related laws.

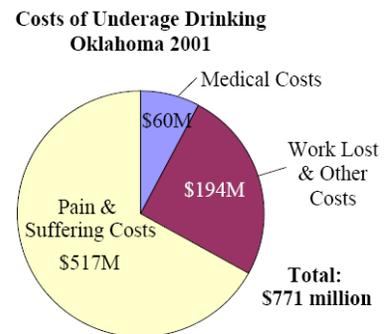
## Introduction

Alcohol consumption by minors is a problem in Oklahoma and across the United States. It is not only dangerous due to the risks associated with the impairment that results from alcohol consumption, but also from multiple threats to long-term development and well-being for our children. Youth under the influence of alcohol are prone to act impulsively. Underage alcohol use causes youth to take risks that they ordinarily would not and can be linked to other high risk behaviors such as unprotected sex, suicide, drunk driving, binge drinking, delinquency, violence, and school dropout.

## Problems and Costs Associated with Underage Drinking in Oklahoma

Underage drinking cost the citizens of Oklahoma \$771 million in 2001. These costs include medical care, loss of work, and pain and suffering associated with the multiple problems resulting from the use of alcohol by youth<sup>2</sup>. This translates to a cost of \$2,082 per year for each young person in the State. Oklahoma ranks 30th highest among the 50 states for the cost per youth of underage drinking. Excluding pain and suffering from these costs, the direct costs of underage drinking incurred through medical care and loss of work costs Oklahoma \$254 million each year.

Youth violence and traffic crashes attributable to alcohol use by underage youth in Oklahoma represent the largest costs for the State. However, a host of other problems contribute substantially to the overall cost. Among teen mothers, fetal alcohol syndrome (FAS) alone costs Oklahoma \$12.7 million annually. Young people who begin drinking before the age of 15 are four times more likely to develop alcohol dependence and are two and a half times more likely to become abusers of alcohol than those who begin drinking at age 21<sup>3</sup>. In 2002, 652 youth 12-20 years old were admitted for alcohol treatment in Oklahoma, accounting for 8.5 percent of all treatment admissions for alcohol abuse in the State<sup>4</sup>. In 2001, underage drinkers consumed 20 percent of all alcohol sold in Oklahoma, totaling \$184 million in sales.



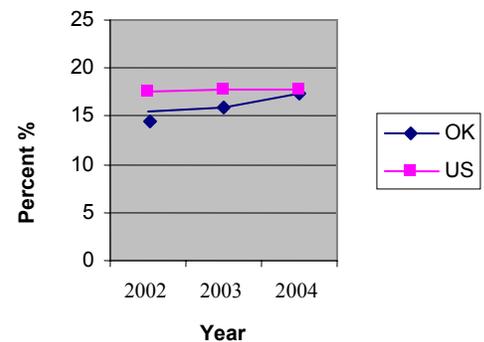
**Costs of Underage Drinking by Problem, Oklahoma 2001**

<b>Problem</b>	<b>Total Costs (in millions)</b>
Youth Violence	\$413.3
Youth Traffic Crashes	\$196.1
High-Risk Sex, Ages 14-20	\$62.7
Youth Property Crime	\$40.7
Youth Injury	\$25.2
Poisonings and Psychoses	\$8.6
FAS Among Mothers Age 15-20	\$12.7
Youth Alcohol Treatment	\$11.9
<b>Total</b>	<b>\$771.2</b>

In 2004 in the U.S., approximately 10.8 million underage persons aged 12 to 20 reported drinking alcohol in the past month. Nearly 70 percent (7.4 million) of these minors reported binge drinking and 22 percent (2.4 million) could be classified as regular heavy drinkers. Fortunately, on a positive note, the average age of onset for drinking alcohol has increased over the last decade from 13.8 years in 1991 to 14.2 years in 2003<sup>5</sup>.

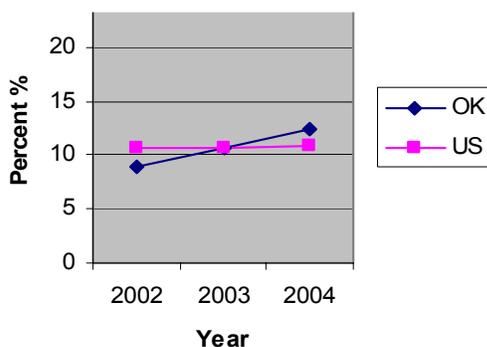
In general, fewer Oklahoma minors consume alcohol compared to the U.S. as a whole; however some troubling trends are emerging. The proportion of the 12-17 year old population using alcohol in the last 30 days appears to be very stable at the national level while increasing in Oklahoma (Figure 1). The use of alcohol among 12-17 year olds in Oklahoma (17.4 percent) is slightly below the national (17.7 percent) level, but, the number of Oklahoma minors reporting current alcohol use has increased by 12.8 percent in just the last 3 years. If the trend continues, this age group will likely surpass national levels in the near future. Binge drinking within the 12-17 age group (Figure 2) at the national level also appears to be stable, while the data for Oklahoma shows an upward trend with recent rates higher than the national level. Over the last three years, the number of Oklahoma minors reporting binge drinking increased by 39 percent.

**Figure 1: Comparison of Current Alcohol Use for youth between 12 – 17 years of age.<sup>5</sup>**



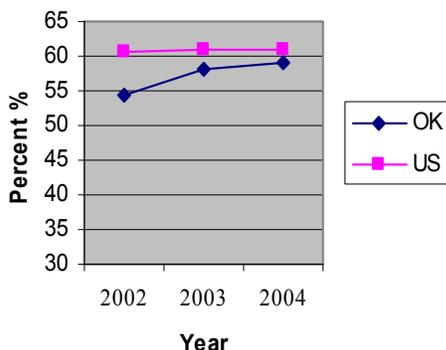
A similar pattern is seen for the 18-25 year old population in Oklahoma. Oklahomans in this age group (Figure 3) use alcohol less frequently than the national average (59.1 percent versus 60.9 percent), but an upward trend has been occurring over the last three years.

**Figure 2: Comparison of Binge Drinking for youth between 12 – 17 years of age.<sup>5</sup>**

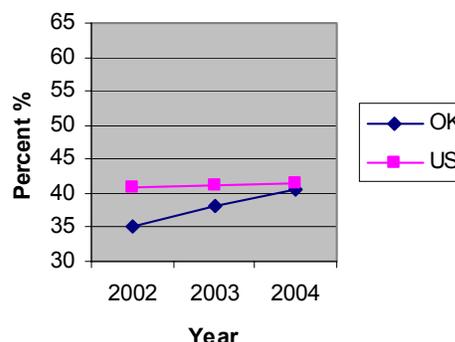


The data for 30 day alcohol use and binge drinking (Figure 4) suggest an overall upward trend of these behaviors for Oklahoma youth with ever closer approximations to national averages. Oklahoma's current use for 18-25 year olds has increased by 8.4 percent since 2002. This data suggests that both alcohol use and binge drinking have increased from 2002 to 2004. There has been a substantial increase in binge drinking of 15 percent since 2002.

**Figure 3: Comparison of Current Alcohol Use for youth between 18 – 25 years of age.<sup>5</sup>**

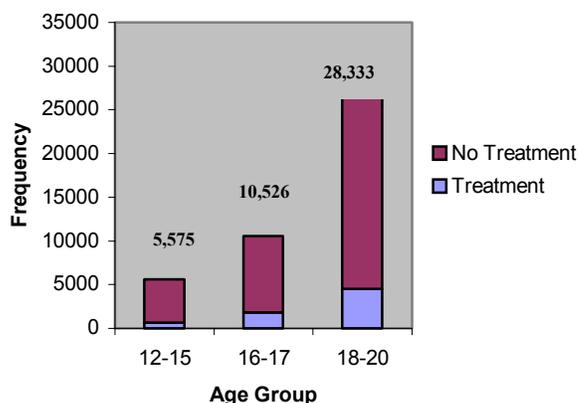


**Figure 4: Comparison of Binge Drinking for youth between 18-25 years of age.<sup>5</sup>**



The number of Oklahoma youth with a serious alcohol problem is estimated to be 44,000; however, for many this problem goes untreated<sup>6</sup>. Youth with untreated alcohol problems face many increased risks when compared to their peers. As seen in Figure 5, 88 percent of 12-15, 83 percent of 16-17, and 84 percent of 18-20 year olds with an alcohol problem do not receive treatment<sup>5</sup>. This data suggests that only a small fraction of those needing help with their substance abuse problems are receiving treatment. Youth who participate in underage drinking are more likely than their peers to be involved in destructive behaviors such as risky sexual activities, delinquency, and truancy.

**Figure 5: Oklahoma youth with a serious alcohol problem**



### *Consequences of alcohol consumption by minors*

Alcohol consumption, especially heavy and binge drinking by minors, has serious consequences for our society. It can lead to alcohol poisoning, risky sexual behavior, sexual assaults, delinquency, crime and death.

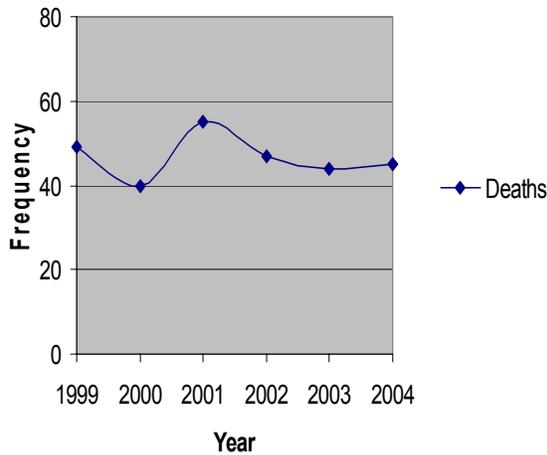
### *Health effects*

In 2002, 9.6 percent of the state’s population (3,570,262) aged 12-20 years drank so regularly that they met diagnostic criteria for alcohol abuse or dependence disorder<sup>5</sup>. Emergency room visits and hospitalization resulting from alcohol use by this age group continue to increase. In 2001, there were seven minors hospitalized for alcohol related problems compared to 24 in 2004. This constitutes a 242 percent increase and may be correlated to the increase in binge drinking over the same time period.

Every alcohol related death is a serious tragedy. In Oklahoma, 280 minors died after consuming alcohol over the last five years, and three times as many males die after consuming alcohol than

females. More African Americans (208 per 100,000) die from alcohol related deaths than any other race. Of the 280 non-natural deaths for 13-20 year olds 46 percent are vehicle related, 65 percent firearm, and 20 percent are related to drug/poisoning.

**Figure 6: Non-natural deaths with a positive BAC by year for 13-20 years old<sup>7</sup>**



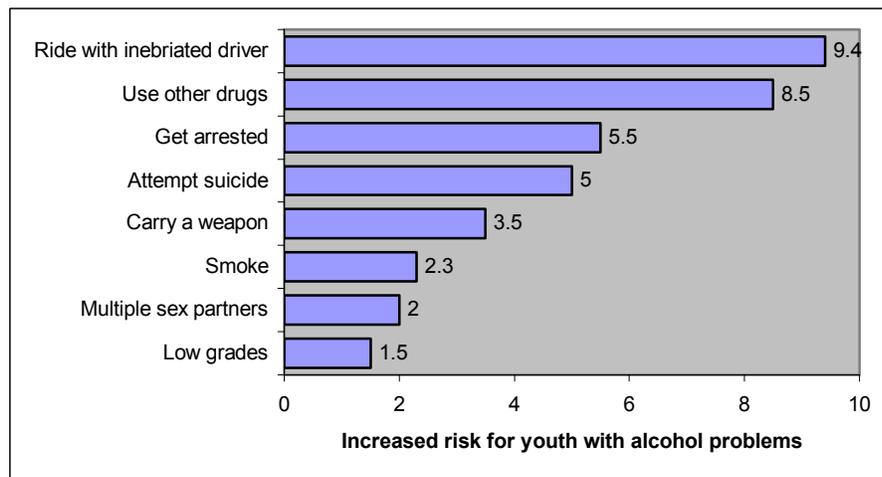
**Table 1: Non-natural alcohol-related deaths by mechanism of injury for 13-20 year olds, 1999-2004<sup>7</sup>**

Mechanism	Number	% of Total
Traffic-Vehicle	130	46%
Firearm	65	23%
Drug/Poison	20	8%
Hanging	15	5%
Traffic-Not Specified	15	5%
Other	19	7%
Drowning	9	3%
Stab/Cut	7	3%
Total	280	100%

### Risky Behaviors

Oklahoma minors with alcohol problems are more likely to participate in negative behaviors. They are 9.4 times more likely to drive a car after drinking, 8.5 times more likely to use other drugs, and are five times more likely to attempt suicide (Figure 7)<sup>5</sup>. Additionally, youth who have alcohol problems tend to experiment with other illicit drugs, carry a weapon, smoke, engage in risky sexual behavior, and have lower grades compared to their peers.

**Figure 7: Increased Risk to Youth who Use Alcohol by Type of Indicator**



Alcohol is the most prevalent drug of choice among minors. However, when evaluating arrest data there are minimal differences between alcohol and drug arrests, which suggest that alcohol related crimes may not be receiving the same law enforcement attention as other drugs (figure 8). This data represents a significant problem for Oklahoma. In April 2006, House Bill 3056 - the Youth Access to Alcohol Act - was signed into law. This law established a significant increase in the penalties for adults/retailers that provide alcohol to minors as well as minors found in possession of alcohol. The youth alcohol law covers alcohol possession for minors regardless of alcohol concentration (3.2 or higher). All of the offenses are considered misdemeanors.

First Offense

- Fine not to exceed \$300 –or-
- Community service not to exceed 30 hours –or-
- Combination of both
- Revocation of drivers’ for a period of time

Second Offense

- Fine not to exceed \$600 –or-
- Community service not to exceed 60 hours –or-
- Combination of both
- Revocation of drivers’ for a period of time

Third Offense

- Fine not to exceed \$900 –or-
- Community service not to exceed 90 hours –or-
- Combination of both
- Revocation of drivers’ for a period of time

As reported in figures 1-4, both current use and binge drinking among minors are increasing at alarming rates. It appears that Oklahoma is missing an important opportunity to make a difference in the lives of our youth.

**Figure 8: Substance Abuse Arrests among Juvenile Offenders <sup>8</sup>**

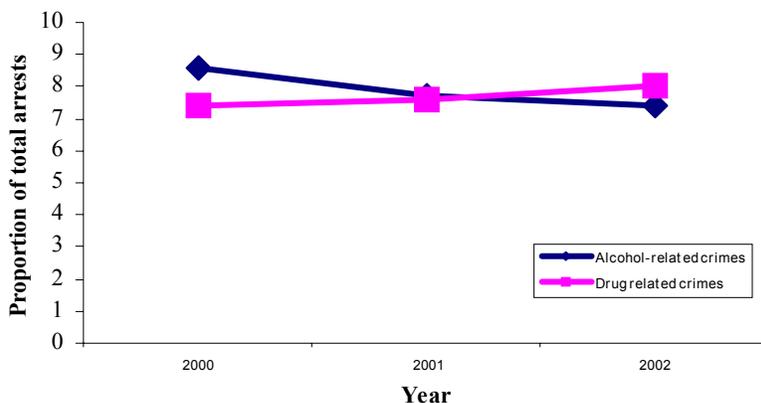
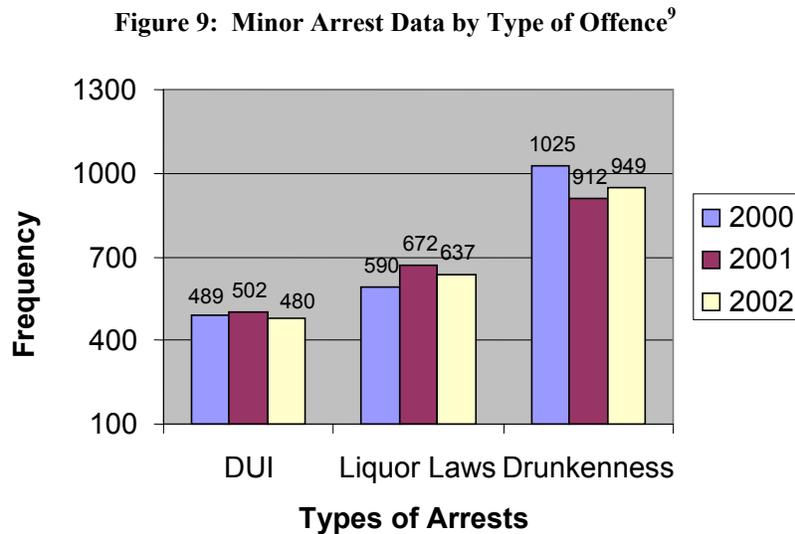


Figure 9 displays the estimated number of arrests of persons under age 18 in Oklahoma for 2000-2002 from the Office of Juvenile Justice and Delinquency Prevention (OJJDP).



### *Needs Assessment Conclusion*

Oklahoma has no central data repository for state level specific data which limits Oklahoma’s ability to adequately assess the needs and problems associated with underage drinking. Available data remains fragmented, scattered across numerous agencies, and does not coincide with national data standards. Of paramount importance is the creation of a central research and evaluation data repository that includes underage drinking incidence and prevalence, injury and mortality data, and student self report data for all Oklahoma youth.

### *Current underage drinking prevention activities*

In July of 2006, the Governor’s Task Force on Prevention of Underage Drinking conducted a statewide environmental scan on current activities specific to underage drinking prevention. The environmental scan evaluated the characteristics of each activity including the goal, target age group, number of people served and the target community. The following describes the findings.

The environmental scan was distributed to 110 agencies/partnerships statewide. Of the 110 agencies/partnerships, 18 were Area Prevention Resource Centers (APRCs), 52 were Turning Point Partnerships, and 40 were Oklahoma Commission on Children and Youth (OCCY) partnership boards. Of the total number of agencies/partnerships that received the environmental scan, 19 (17.3 percent) returned the requested information. APRCs had the greatest participation rate of 50 percent. Turning Point partnerships and OCCY partnership boards had participation rates of 10 percent and 13 percent respectively.

Respondents were asked what underage drinking prevention activities (programs, strategies, practices, or policies) in which they are involved within the communities they server. A total of 90 community activities were listed between all respondents. The community activities have been condensed into several categories, and the percentage of each activity compared to the others was calculated (Table 2). The data suggests that community outreach efforts (27.8

percent) and school-based programs (15.6 percent) are the most popular means of disseminating underage drinking prevention education, whereas media advocacy and reward/reminder visits were less utilized.

**Table 2: Community Activity Categories**

<b>Services Reported (N=90)</b>	<b>%</b>
Community Outreach (n=25)	27.8
In-School Efforts (n=14)	15.6
Project Under 21 (n=11)	12.2
Merchant Compliance Checks/Merchant Education (n=9)	10.0
Communities Mobilizing for Change on Alcohol (n=7)	7.8
Town Hall Meeting (n=6)	6.7
Youth Access to Alcohol Ordinance (n=5)	5.6
Turning Point Partnership (n=3)	3.3
Red Ribbon Campaign (n=3)	3.3
Media Advocacy (n=2)	2.2
Website (n=2)	2.2
Reward/Reminder Visits (n=2)	2.2
Drug Free Communities Grant (n=1)	1.1

### *Target Age Group*

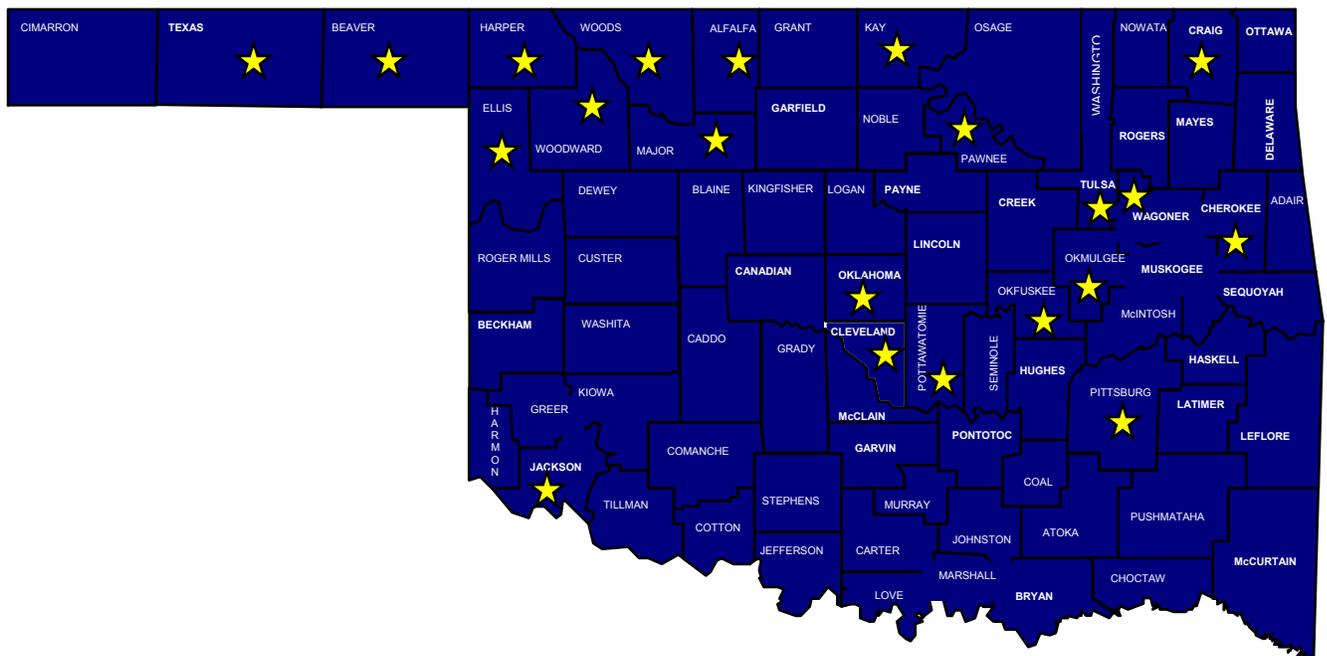
The target age group was split into two categories; those less than 21 and those 21 and older. Of the 90 programs reported, 42 (46.7 percent) targeted adults, whereas 48 (53.3 percent) targeted individuals under the age of 21. Of the 48 programs that focused on those under the age of 21, six (12.5 percent) were specific to elementary school ages, six (12.5 percent) were specific to middle school ages, and 36 (75 percent) were specific to high school ages. The data suggests that there is an increased focus on prevention for older ages and a lack of prevention efforts to younger ages.

### *Number of People Served*

The number of people served, while very broad, seemed to be largely dependent on geographic location and the types of services offered. Two respondents reported numbers served ranging from 19,935 to 47,999. These numbers were serviced through strategies and programs such as Town Hall Meetings, Project Under 21 initiatives, and Communities Mobilizing for Change on Alcohol program efforts. Several respondents reported numbers served between 2,500 and 6,000. The corresponding programs/strategies consisted mostly of community outreach efforts as well as media advocacy and coalition participation. Programs and strategies such as, life skills training, Red Ribbon week, and compliance checks were used to service numbers ranging from seven to 732.

### *Distribution of Services*

The map below illustrates the distribution of community activities and services reported by respondents. Stars represent the counties that are receiving services as indicated on the environmental scan. Of the 77 counties in Oklahoma, 21 (27 percent) are currently being served with underage drinking prevention services. Furthermore, there is a strong service representation in the northern and eastern regions of the state. The central region has a fairly strong service representation, but has some areas where services are not being delivered. The regions that appear to be lacking adequate service representation are the western and southern regions.



Based on this environmental scan and the needs assessment conducted by the needs assessment sub committee it is evident that adequate services are not being delivered to all areas of the state and are not being delivered evenly to all age groups. One of the foundations of prevention is early intervention, but the highest percentage of prevention services is being delivered to high school students. It is necessary to implement a strategy that will create a more even distribution of services across the state and the life-span. Our evaluation supports the need for a state initiated and led underage drinking prevention strategy. The proposed strategy is data driven, needs assessment based and designed to serve as a model for local communities to take action to prevent and reduce underage drinking.

**Appendix A  
Executive Order**



**Brad Henry**  
Governor

**F I L E D**

DEC 19 2005

EXECUTIVE DEPARTMENT

OKLAHOMA SECRETARY  
OF STATE

EXECUTIVE ORDER 2005- 36

I, Brad Henry, Governor of the State of Oklahoma, by the authority vested in me pursuant to Sections 1 and 2 of Article VI of the Oklahoma Constitution, hereby establish the Governor's Task Force on Prevention of Underage Drinking.

The purpose of the Task Force shall be to conduct a comprehensive study of the effect of underage drinking in Oklahoma. Alcohol is the number one drug of choice for youth in Oklahoma. Almost half of all youth report current alcohol use (higher than the national average of 44.9%). In addition, youth in Oklahoma start young: one in four (26.8%) have consumed alcohol before the age of 13, and an alarming four out of every five high school students admit to already having tried alcohol (78.6%).

Adolescents under the influence of alcohol are prone to act impulsively. Underage alcohol use causes youth to take risks that they ordinarily would not consider and can be linked to other risky behaviors, such as teen pregnancy, suicide, drunk driving, binge drinking, other drug use, delinquency, violence and school dropout.

The Task Force shall consist of not more than fifteen (15) members. All members shall be appointed and serve at the pleasure of the Governor, and may include persons who are or have been engaged in the fields related to substance abuse prevention, law enforcement, education, and public health. The Governor's Secretary of Health shall serve as an ex-officio member of the Task Force.

The Task Force shall meet at such times and places as it deems appropriate. Members shall serve without compensation. Task Force members employed by a state agency shall be reimbursed travel expenses related to their service on the Task Force as authorized by state law by their respective state agency. Legislative members of the Task Force shall be reimbursed by their respective legislative bodies for necessary travel expenses incurred in the performance of their duties as authorized by state law. Remaining Task Force members shall be reimbursed travel expenses related to their service on the Task Force as authorized by state law by the Department of Mental Health and Substance Abuse Services.

Administrative support for the Task Force, including, but not limited to, personnel necessary to ensure the proper performance of the duties and responsibilities of the Task Force,

shall be provided by the Department of Mental Health and Substance Abuse Services. The Governor shall appoint the chair and vice chair.

The Task Force shall plan, organize and implement community town hall meetings across the state in conjunction with the national spring broadcast on preventing underage alcohol use. In addition, the Task Force shall conduct a needs assessment to determine the nature and extent of the underage drinking in Oklahoma; identify the current activities to reduce or prevent underage drinking in Oklahoma; examine overall enforcement efforts, including the range of penalties for different violations and the interaction of enforcement agencies; and identify challenges and barriers to reducing underage drinking.

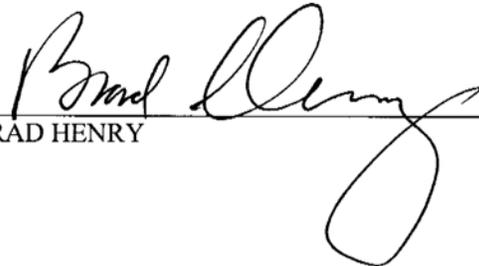
The Task Force shall evaluate any proposed legislation aimed at reducing youth access to alcohol, and make recommendations to the Office of the Governor regarding such legislation. In addition, the Task Force shall identify strategies to reduce underage access to alcohol.

The Task Force shall complete a final report within one year of the date of this Order. The final report shall contain recommendations to reduce and prevent underage drinking, make recommendations for policy changes, and provide a comprehensive statewide strategic plan for underage drinking prevention.

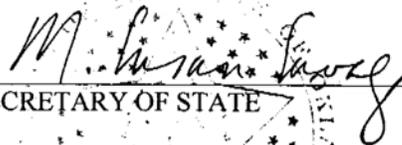
This Executive Order shall be distributed to the Department of Mental Health and Substance Abuse Services, which shall cause the provisions of this Order to be implemented.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Oklahoma to be affixed at Oklahoma City, Oklahoma, this 19 day of December, 2005.

BY THE GOVERNOR OF THE STATE OF OKLAHOMA

  
\_\_\_\_\_  
BRAD HENRY

ATTEST:

  
\_\_\_\_\_  
SECRETARY OF STATE



**APPENDIX B**  
**Sample Signage**

**IT'S THE LAW:  
YOU MUST BE 21 OR OLDER  
TO LEGALLY PURCHASE  
AND/OR CONSUME ANY  
LIQUOR PRODUCT,  
3.2 BEER, OR ALCOHOLIC  
BEVERAGE.**

Oklahoma Statute tit. 37, § 603

**APPENDIX B**  
**Sample Signage**

**PROVIDING ALCOHOL/ 3.2 BEER TO  
MINORS IS ILLEGAL AND CAN RESULT IN  
SEVERE PENALTIES**

**1st violation:** maximum fine of \$500 and/or maximum of 1 year in jail;  
suspension of license for up to 30 days.

**2nd violation:** guilty of a misdemeanor; maximum fine of \$2,500 and/or  
max. of 1 year in jail; suspension of license mandatory for 30 days.

**3rd violation:** guilty of a felony; maximum fine of \$5,000 and/or  
maximum of 5 years in prison; suspension of license mandatory for 30  
days.

**4th violation:** Mandatory revocation of permit.  
Provides the assumption that the person demanded, was shown, and  
reasonably relied on proof of age

Oklahoma Statute tit. 37, § 241 (D)

**APPENDIX B  
Sample Signage**

**FRAGILE**

NO AMOUNT of alcohol is safe if you are pregnant

**THINK  
FOR Two**

**NSLC**

Too many babies  
have their first drink  
before they are born.

Prevent  
Fetal Alcohol  
Spectrum Disorders  
by  
NOT DRINKING  
when you are pregnant

**Warning:**  
Drinking alcohol  
during pregnancy  
can cause birth  
defects and  
brain damage  
to your baby.

1-877-FAS-INFO • [www.alcoholfreepregnancy.ca](http://www.alcoholfreepregnancy.ca) Ontario

**WARNING**  
FROM THE LIQUOR CONTROL BOARD

**Avoid alcohol  
during pregnancy.**

Alcohol use during pregnancy  
may cause birth defects such  
as Fetal Alcohol Syndrome.

For more information about FAS please call the March of Dimes  
at 1-888-NO-DIMES or 1-888-643-4637

To watch this sign, please call your local Liquor Control Board Office.

## APPENDIX C MEDIA CAMPAIGN PLAN

### **The Problem:**

Underage drinking is prevalent among youth under the legal drinking age of 21 in the State of Oklahoma and is related to a variety of public health and safety problems, including high risk sexual behaviors, violence, property crime, community nuisances, traffic crashes, unintentional injuries, homicide, suicide, chronic disease, and increased propensity for addiction.

### **Contributing Factors:**

- Norm/perception of harmlessness of youth alcohol use among adults.
- Use is “normalized”, acceptable part of the culture among youth; considered “rite of passage” among adults.
- Use perceived as a social activity.
- Alcohol is easy to obtain via social and commercial sources.
- Laws are not consistently enforced and consequences are perceived as minimal.

### **Underage Drinking Prevention Initiative’s Overall Mission:**

Create and sustain a broad statewide and societal effort dedicated to reducing and preventing underage drinking.

### **Media Campaign Goals:**

- Decrease the social availability of alcohol to youth under 21.
- Decrease the commercial availability of alcohol to youth under 21.
- Advance policies and practices that reduce youth access to alcohol.
- Decrease social acceptance among adults of underage drinking.

### **Media Campaign Objectives:**

- Sustain a large scale research-based advertising campaign targeted at adults.
- Sustain a large scale research-based internet marketing campaign targeted at youth and young adults.
- Mobilize community groups across Oklahoma to launch local media advocacy (earned media) prevention campaigns.
- Evaluate effectiveness of media campaign strategies.

## **Media Advocacy Plan**

### ***Paid Media Objectives:***

*Television commercials, radio spots, billboards, print advertising, internet marketing*

Sustain a large scale research-based advertising campaign targeted at adults, and sustain a large scale research-based internet marketing campaign targeted at youth and young adults to:

- Increase adult’s knowledge, understanding, and agreement of underage drinking as a serious public health and safety problem.
- Change existing norms and perceptions among adults that alcohol is harmless or a “rite of passage”.
- Influence policy makers to enact public policies that reduce youth access to alcohol and reduce the glamorization of alcohol to youth.
- Youth and young adult objective to be determined.

### ***Media Advocacy Objectives:***

*Television/internet/radio news stories, newspaper/magazine/journal articles*

Mobilize community groups across Oklahoma to launch local media advocacy (earned media) prevention campaigns to:

- Generate media outputs that increase adult’s knowledge, understanding, and agreement of underage drinking as a serious public health and safety problem.
- Increase community demands for local ordinances and state legislation that reduce youth access to alcohol and the glamorization of alcohol to youth.
- Increase community demands for responsible alcohol retailer business practices and policies.
- Influence policy makers to enact public policies that reduce youth access to alcohol and reduce the glamorization of alcohol to youth.
- Support statewide initiative goals as they relate to outreach (community organizing), policy development, prevention and enforcement.

## **Phased Approach:**

This plan is based on a phased approach for accomplishing the Underage Drinking Prevention Initiative Media Campaign’s stated goals.

Ongoing: Evaluation Before and During

### **Phase I**

1. Data Collection:
  - a. Conduct statewide assessment measuring perceptions and attitudes of underage drinking.
  - b. Compile existing data on alcohol use and perceptions/attitudes among youth.
2. Partnership Development:
  - a. Convene media campaign planning committee that consists of key stakeholders, including youth, to review data and advise media campaign development.
  - b. Identify key partners in communities to reinforce media messages through local media advocacy campaigns.
3. Universal Media:
  - a. Launch universal media campaign (see page 3).

### **Phase II**

4. Community Organizing:
  - a. Develop and distribute local media advocacy action kits to identified community partners. Kit to include guidance on leveraging Phase I media messages to advance local and state policy change.
5. Selected Media:
  - a. Launch selected media campaign (see page 3).
6. Policy:
  - a. Develop and implement statewide communications plan leveraging message from the media campaign to advance state legislative policy goals of Governor’s Task Force on Underage Drinking.

## Key Messages:

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ol style="list-style-type: none"><li>1. Alcohol is a <i>dangerous drug</i> that poses significant health and safety threats to youth users and communities – it's not "just alcohol".</li><li>2. Young people obtain alcohol more often than not from <i>adult sources</i> – adult retailers, adults who purchase or provide alcohol to underage youth, adults who allow underage drinking to occur, and adults who ignore the issue.</li></ol> | <ol style="list-style-type: none"><li>3. Youth drinking is <i>not a rite of passage</i>. The legal drinking age of 21 is the law because youth experience alcohol differently than adults – youth drink faster and harder than adults, alcohol affects the developing brain of adolescents more negatively than adults, and youth risk-taking behaviors under the influence of alcohol are extremely dangerous.</li><li>4. Youth are barraged in daily life with alcohol messages. The alcohol industry actively competes for the youth market with low prices, sweet-tasting and colorful alcoholic beverages, and marketing that presents drinking as part of a normal social life.</li></ol> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Target Audiences:

Through the combination of activities, the campaign will target universal and selected populations:

### Universal

- **Adults**

Accessible via traditional and targeted media.

- Messages directed at adults must educate about the public health, public safety, economic, and legal issues associated with underage drinking.
- Messages must shift attitudes that deny or ignore underage drinking as a serious problem.
- Messages must increase the perception among adults that having a role in underage drinking will result in punitive consequences.

- **Teens and Young Adults**

Accessible via internet media.

- Message content to be determined.

### Selected

- **Businesses**

Accessible via traditional and targeted media. (Business publications / business groups / newsletters)

- Messages directed at businesses highlighting the legal, economic, and social impacts of irresponsible and illegal practices in the business community that contribute to underage drinking such as sales to minors and youth-centered marketing.

- **Policy Makers (State and Local)**

Accessible via traditional and targeted media.

- Messages directed at policy makers highlighting support of the community and long-term, environmental solutions to the problems created by underage drinking and associated norms.

- **Adult Constituents**

Accessible via traditional and targeted media.

- Messages directed at adult constituents to actively support the enactment and enforcement of policies designed to reduce underage drinking.

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